

<div style="display: inline-block; width: 100%;"> <div style="display: flex; justify-content: space-between; font-size: 0.8em; margin-bottom: 5px;"> SERIAL NO. FILING DATE </div> <div style="font-size: 0.8em;"> <div style="display: flex; justify-content: space-between;"> MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET APPLICANT(S) </div> </div> </div>											
CLAIMS											
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT						
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP
1							51				
2							52				
3							53				
4							54				
5							55				
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41							91				
42							92				
43							93				
44							94				
45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
TOTAL IND.	7		0		0		TOTAL IND.	0		0	
TOTAL DEP.	0		0		0		TOTAL DEP.	0		0	
TOTAL CLAIMS	7		0		0		TOTAL CLAIMS	0		0	